SUBJECT:	Professional Project Services, Inc. (Name of corporation - must include suffix)	<u>, -, , , , , , , , , , , , , , , , , , </u>
Dear Sir or Mada	m:	
"Certificate of Extransact business		reign corporation to
	Raymond Norris	-03/24/98010070 *****122.58 ****12
_	(Name of Person)	70.00
-	Professional Project Services, 1 (Firm/Company)	inc. w98-645
-		— W98-645
- -	(Firm/Company)  1020 Commerce Park Drive	NO CC
- -	(Firm/Company)  1020 Commerce Park Drive (Address)	- NO CC
Should you need	(Firm/Company)  1020 Commerce Park Drive - (Address)  Oak Ridge, TN 37830	— w98-643

### **COURIER ADDRESS:**

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

### **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

98 MAY 20 AM 8:51



### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 24, 1998

RAYMOND NORRIS PROFESSIONAL PROJECT SERVICES, INC. 1020 COMMERCE PARK DRIVE OAK RIDGE, TN 37830

SUBJECT: PROFESSIONAL PROJECT SERVICES, INC.

Ref. Number: W98000006457

We have received your document for PROFESSIONAL PROJECT SERVICES, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please note that your answer in line 6 should refer ONLY to this corporation, and not to any other entity.

Please correct the second page of your application. Although there are two names above "President," you have indicated that the President is "same as above." Please print the name of the President in line 14.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers Document Examiner

Letter Number: 098A00015583



Professionals. Developing Products and Solving Problems.

April 7, 1998

Lee Rivers
Document Examiner
Florida Department of State
P.O. Box 6327
Tallahassee, Florida 32316

Reference number: W98000006457

Thank you for your letter regarding the above referenced application. We have corrected the information on the form and have attached the missing information. If there are additional questions, please do not hesitate to ask.

We appreciate your assistance.

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Cordially,

Raymond/Norris



### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 17, 1998

RAYMOND NORRIS PROFESSIONAL PROJECT SERVICES, INC. 1020 COMMERCE PARK DRIVE OAK RIDGE, TN 37830

SUBJECT: PROFESSIONAL PROJECT SERVICES, INC.

Ref. Number: W98000006457

We have received your document for PROFESSIONAL PROJECT SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Thank you for correcting your application. You must still submit the certificate of existence requested in our previous letter, a highlighted copy of which is attached. We are returning the photocopies you submitted, as they are not the same as the original certificate we require. The certificate of existence is issued by your Secretary of State.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers Document Specialist

Letter Number: 498A00020687

# Pro-2-Serve professional project services, inc.

Professionals. Developing Products and Solving Problems.

April 21, 1998

Lee Rivers, Document Specialist Division of Corporations, Dept. of State P.O. Box 6327 Tallahassee, FL 32314

Subject: W98000006457

Dear Document Specialist,

We apologize for causing so much difficulty for you. The attached document has been obtained from the State of Tennessee and we hope that it is sufficient. The only change had been of type of corporation - from a limited liability corporation to a regular corporation. Please advise if there are further problems.

Sincerely,

Raymond Norris

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## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 27, 1998

RAYMOND NORRIS PROFESSIONAL PROJECT SERVICES, INC. 1020 COMMERCE PARK DRIVE OAK RIDGE, TN 37830

SUBJECT: PROFESSIONAL PROJECT SERVICES, INC.

Ref. Number: W98000006457

We have received your document for PROFESSIONAL PROJECT SERVICES, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Thank you for your letter and corrected application. We are not able to use the certified copy which you submitted (enclosed) because it is not the same as the certificate of existence which we require. The certificate of existence is issued by the same office which provided you with the certified copy, but it is a single page long, has not attachments, and states that the corporation is still active on their records.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Letter Number: 998A00022600

Lee Rivers Document Specialist

# Pro-2-Serve professional project services, inc.

Professionals. Developing Products and Solving Problems.

May 18, 1998

Lee Rivers, Document Specialist Division of Corporations, Dept. Of State P.O. Box 6327 Tallahassee, FL 32314

Subj: W98000006457

Dear Document Specialist,

Here is the Certificate of Existence for our company from the State of Tennessee. We were still operating in your state as an LLC until very recently and have now withdrawn as an LLC and begun doing business there as a corporation. Please do not hesitate to ask if we may provide additional information.

! Sincerely,

Raymond Norris

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Name of corpo words or abbre	sional Project Seconation; must include the work wiations of like import in langor partnership if not so contains	d "INCORPORATED", guage as will clearly indi	cate that it is a corporat		·
2. <u>Tennes</u> (State or countr	see ry under the law of which it is	3	62-1661329 (FEI numbe	er, if applicable)	<u> </u>
Upo 6. doi/16.y	1997  ate of incorporation)  an Qualification  an August Mark Mark Mark Mark Mark Mark Mark Mark	<b>xk</b> w x <del>a x</del> xa x k kw k ke	ear corp. will cease to e	CONDONANT FOR	··· - <del>.</del>
•	5 U.S. Highway Or	ne, Juno Beach,		→ ¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬	<u> </u>
(Purpose	sional placement e(s) of corporation authorized reet address of Florida re Thomas D. Sabor	in home state or country gistered agent: (P.O.			F
Office Address:	-14255 U.S. High	hway One, Juno,	Beach, Florida, 33408 (Zip code)		
Having been nam in this application comply with the p	agent's acceptance:  ned as registered agent and to a, I hereby accept the appoint rovisions of all statutes relat ligations of my position as re  (Re	tment as registered agen ive to the proper and con	t and agree to act in th nplete performance of	is capacity. I further	agree to

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRECTO	RS (Street address only - P.O. Box NOT acceptable)
-	F. Barry Goss, Ph.D.
	1020 Commerce Park Drive,Oák Ridge, TN 37830
	7 <sub>.</sub> 9
Director:	Karen Goss, 2301 Clipper Lane, Knoxville, TN 3792⊉ 71
<del></del>	
Director:	RA 5
Address:	
3. OFFICER	S (Street address only - P.O. Box NOT acceptable)
resident:	same as above L. Darry Goss, Fn. d.
Address:	2301 Clipper Lane, Knox, TN. 37922
Vice President:	
1001033	
	K. C. SS
ecretary:	Karen Goss 2301 Clipper Lane, Knox, TN.3792
Address:	2301 Clipper Lane, Knox, IN State
<u></u>	
reasurer:	
Address:	<u> </u>
OIE: If nece	ssary, you may attach an addendum to the application listing additional officers and/or directors.
3	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
	President
4	(Typed or printed name and capacity of person signing application)

Secretary of State **Corporations Section** James K. Polk Building, Suite 1800 Nashville, Tennessee 37243-0306

ISSUANCE DATE: 05/08/1998 REQUEST NUMBER: 3510-0111 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 10/04/1995 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0301230 JURISDICTION: TENNESSEE

PRO-2-SERVE PROFESSIONAL PROJECT SVCS. 1020 COMMERCE PARK ATTN RAYMOND NORRIS OAK RIDGE, TN 37830

REQUESTED BY:
PRO-2-SERVE PROFESSIONAL PROJECT SVCS.
1020 COMMERCE PARK
ATTN RAYMOND NORRIS OAK RIDGE, TN 37830

### CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"PROFESSIONAL PROJECT SERVICES, INC."

THAT THE CORPORATION IS DELINQUENT IN THE PAYMENT OF FRANCHISE AND EXCISE TAXES; THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED WITH THIS OFFICE; AND THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

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FOR: REQUEST FOR CERTIFICATE

ON DATE: 05/08/98

FROM: PRO-2-SERVE PROFESSIONAL PROJECT SERVICE 1020 COMMERCE PARK

FEES \$10.00

\$10.00

OAK RIDGE, TN 37830-0000

TOTAL PAYMENT RECEIVED:

RECEIVED:

\$20.00

RECEIPT NUMBER: 00002308575 ACCOUNT NUMBER: 00260456



RILEY C. DARNELL SECRETARY OF STATE